

State of Indiana

# Comprehensive Survey Tool Provider User Guide

Division of Disability and Rehabilitative Services



<b>1.0</b>	<b>Introduction – The Comprehensive Survey Tool.....</b>	<b>4</b>
1.1.	Product Support .....	4
<b>2.0</b>	<b>Overview – Reviewing and Entering a Corrective Action Plan (CAP) .....</b>	<b>5</b>
2.1	Viewing Survey Findings .....	6
2.2	Search Option to Find a Survey .....	8
2.3	The Findings Link .....	10
2.4	List of Findings .....	11
2.5	View CAP Link .....	12
2.6	CAP Details Screen.....	13
2.7	Findings Screen.....	15
<b>3.0</b>	<b>Uploading and Viewing Documents .....</b>	<b>16</b>
3.1	Upload a Document.....	16
3.2	View an Uploaded Document.....	23
3.3	Delete an Uploaded Document .....	24
<b>4.0</b>	<b>Overview – (Case Manager) Working with Submitted CAPs .....</b>	<b>26</b>
4.1	Review CAPs (Case Manager/Administrative Representative).....	28
4.2	Use the Search Option to Find a Survey.....	29
4.3	The Findings Link .....	31
4.4	List of Findings .....	32
4.5	Enter Case Manager Notes .....	34
4.6	Email a CAP .....	35
	<b>Table of Figures.....</b>	<b>37</b>

## **1.0 Introduction – The Comprehensive Survey Tool**

The Comprehensive Survey Tool (CST) is a Web-based tool that you can use to:

- Review survey findings.
- Enter a Corrective Action Plan (CAP).
- Upload and view documents.
- Work with a submitted CAP.

### **1.1. Product Support**

Use of the CST requires that you possess a unique login username and password that is assigned to you by the Administrative Representative for your department. If you encounter an issue regarding the login process, contact this individual.

After login, if you encounter a problem with this product, or if you have a question or recommendation regarding this user guide, contact the FSSA Technology Services Help Desk at:

[FTSHelp@fssa.IN.gov](mailto:FTSHelp@fssa.IN.gov)

A member of the FTS Help Desk team will contact you to address the issue.

## 2.0 Overview – Reviewing and Entering a Corrective Action Plan (CAP)

1. Navigate to the Provider Website at <https://ddrsprovider.fssa.in.gov/BDDS/>.
2. Log in by using your username and password.
3. Click the **Survey List** link under the **CST** menu on the left side of the screen.
4. Search for the survey by using the search option or pick the survey from the list of surveys.
5. Click **Findings** next to a survey that contains **New** in the **Status** column. The system displays a list of findings.
6. Locate the finding you want to view from the list.
7. Click the **View** hyperlink under the **CAP** column next to the finding you want to view.
8. Complete the information in the **For Provider Only** section of the screen (all fields are required).
9. Click the **Save** button to save what's been entered without submitting the CAP.
10. Click the **Submit** button to submit the CAP.

## 2.1 Viewing Survey Findings

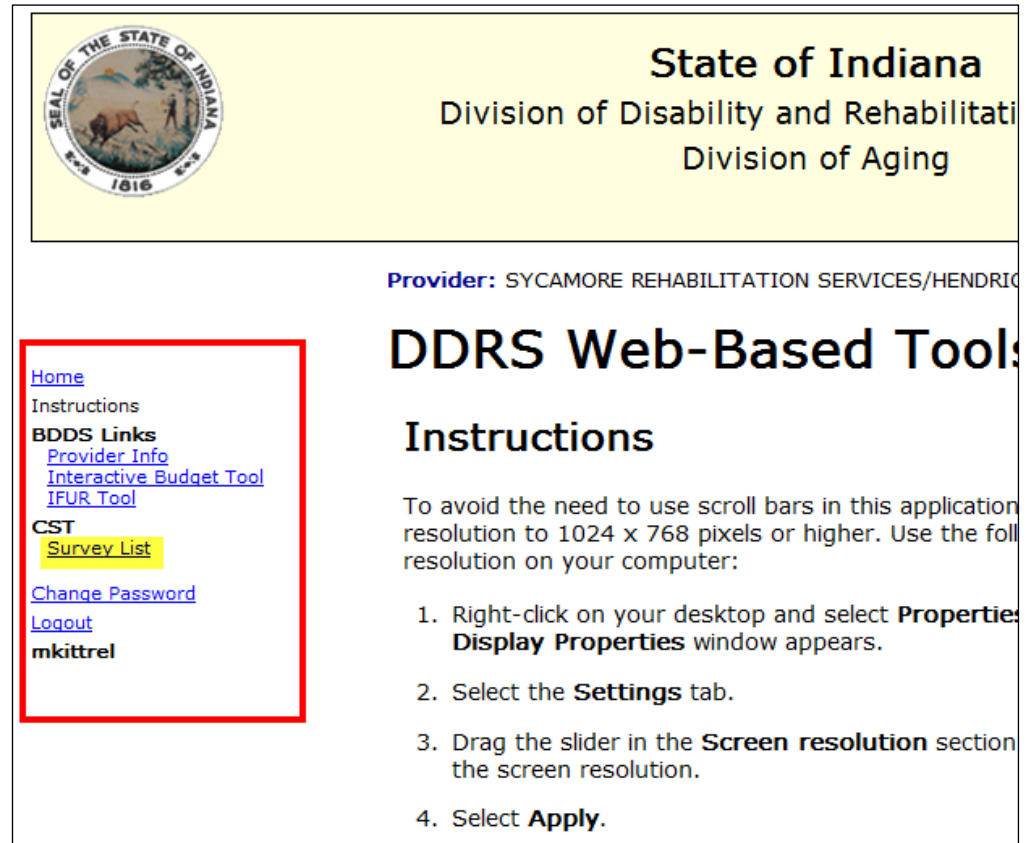
This section of the *Provider CST User Guide for DDRS* describes how to view survey findings.

Navigate to the Provider Website at:

<https://ddrsprovider.fssa.in.gov/BDDS/>.

Log in by using your username and password.

Click on the **Survey List** link under the **CST** menu (*Figure 1*) on the left side of the screen.



*Figure 1 - CST Survey List Link*


The **Survey List** screen appears, as shown in *(Figure 2)*.

State of Indiana

Division of Disability and Rehabilitative Services

Division of Aging

Comprehensive Survey Tool



**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC.

[Survey List](#)

**Survey List**

Client Last Name

Client First Name

Survey Name

Search

Client Name	Survey ID	Status			
Flintstone, Pebbles	23902	CAP Needed	<a href="#">Findings</a>	<a href="#">Documents</a>	<a href="#">Schedule</a>

Figure 2 - Survey List Screen

## 2.2 Search Option to Find a Survey

There is a search option on the **Survey List** screen (*Figure 3*) that allows you to search for a survey based on one or more of the following pieces of information for the client:

- Last Name
- First Name
- Survey Name

**For Example** To locate a survey based on a client's first name and the first two letters of the client's last name, you would enter the information into the **First Name** field and the **Last Name** field.



**Comprehensive Survey Tool**

**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC

[Survey List](#)

**Survey List** Search option

Client Last Name Client First Name Survey Name

Client Name	Survey ID	Status
Flintstone, Pebbles	23902	MP Needed

*Figure 3 - Survey Search Option*



Once you've entered the search criteria, click the **Search** button (*Figure 4*) to display a list of surveys that meet the search criteria (*Figure 5*).

**Comprehensive Survey Tool**

**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC.

[Survey List](#)

**Survey List** Search button

Client Last Name Client First Name Survey Name

Flintstone

Search

Client Name	Survey ID	Status
Flintstone, Pebbles	23902	CAP Needed

*Figure 4 – Search for a Survey*

**State of Indiana**  
Division of Disability and Rehabilitative Services  
Division of Aging  
Comprehensive Survey Tool

**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC.

[Survey List](#)

**Survey List**

Client Last Name Client First Name Survey Name

List of surveys meeting the search criteria

Client Name	Survey ID	Status	Findings	Documents	Schedule
Flintstone, Pebbles	23902	CAP Needed	<a href="#">Findings</a>	<a href="#">Documents</a>	<a href="#">Schedule</a>

*Figure 5 - List of Surveys*

## 2.3 The Findings Link

The list of surveys displays the:

1. Client Name
2. Survey ID
3. Survey Status

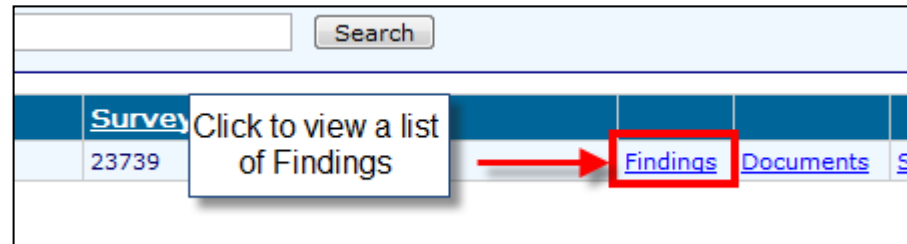


Figure 6 - Findings Link


**For Example** The survey **Status** reflects that a CAP is needed and that there are findings. To see the findings for the survey, click the **Findings hyperlink (Figure 6)**.



## 2.4 List of Findings

When the **List of Findings** screen opens, a list of relevant **Survey Details** is displayed just below the Provider's name (*Figure 7*).

**State of Indiana**  
 Division of Disability and Rehabilitative Services  
 Division of Aging  
 Comprehensive Survey Tool



**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC.

[Survey List](#)

**List of Findings**
**Survey Details**

**Survey Detail**

Survey ID:	23902
Survey Status:	CAP Needed
Client Name:	Flintstone, Pebbles
Waiver:	SSW
Surveyor Name:	Demo Surveyor
Coordinator Name:	Demo Coordinator
Date IST Met (DDRS Only):	
Comprehensive CAP completion due date:	10/14/2009
Comprehensive CAP reviewed by case manager due date:	10/14/2009
Date Comprehensive CAP reviewed and locked by Case Manager:	
Date Comprehensive CAP closed by surveyor:	

Vendor ID	Provider	Survey Name	Indicator ID	Finding Narrative	Service	Date CAP Entry Complete	Status	CAP
		DDRS Service		Findings entered for				

**Figure 7 - List of Survey Findings - Survey Details**

## 2.5 View CAP Link

Below the Survey Details the list of Survey Findings is displayed.

As a Provider, you can view findings for any of the providers displayed in the **Findings** window.

To enter a CAP for a finding, click the **View** link next to the finding (*Figure 8*).

Vendor ID	Provider	Survey Name	Indicator ID	Finding Narrative	Service	Date CAP Entry Complete	Status	CAP
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.A.1	Findings for test item one.			New	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.B.1	Findings for test item two.	FHG8		New	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.C.1.	Findings for test item three.	FHG8		New	<a href="#">View</a>

*Figure 8 - List of Survey Findings - View Link*

## 2.6 CAP Details Screen

**State of Indiana**  
 Division of Disability and Rehabilitative Services  
 Division of Aging  
 Comprehensive Survey Tool



**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC.

[Survey List](#)

**CAP Details** [Back to Findings](#)

Survey ID:	23902
Survey:	BQIS Person Centered Compliance Tool
Client Name:	Flintstone, Pebbles
Provider:	ALLIANCE HOME HEALTH SERVICES INC.
Vendor ID:	14
Service:	RSPO
Indicator ID:	I.A.1
Survey Question:	The individual's support team gathers information about the individual's preferences, personal goals, needs and abilities to develop the individual's support plan.
Finding Narrative:	Findings entered for Alliance Home Health Services - RSPO
CAP Status:	<b>New</b>
Date CAP Entry Complete:	
Date CAP Locked:	
Date Accepted:	
Date Denied:	
Denied Reason:	

**For Provider Only**  
 Date Closed/Rejection:

**Figure 9 - CAP Details Screen**

The upper portion of the **CAP Details** screen (*Figure 9*) displays the following fields:

- |               |             |                     |                           |                 |
|---------------|-------------|---------------------|---------------------------|-----------------|
| • Survey ID   | • Provider  | • Indicator ID      | • CAP Status              | • Date Accepted |
| • Survey Name | • Vendor ID | • Survey Question   | • Date CAP Entry Complete | • Date Denied   |
| • Client name | • Service   | • Finding Narrative | • Date CAP Locked         | • Denied Reason |

Beneath this section of the screen is the **For Provider Only** section (*Figure 10*). This area is where the provider enters all the elements of the CAP. To enter information into a field, click in the field with your mouse.

**For Provider Only**

Date Planned Implementation:

Title of Responsible Person:

Name of Responsible Person:

Corrective Action Plan:

Enter information into the yellow highlighted fields.

Save Submit

*Figure 10 - Enter CAP in For Provider Only Section*

Click the **Save** button to save what's been entered without submitting the CAP.

Save Submit

Click the **Submit** button to submit the CAP.

*Figure 11 - CAP Details Screen - Save and Submit Buttons*

## 2.7 Findings Screen

Once the CAP has been submitted, the status on the **Findings** screen will change from **New** to **Submitted** with the date that the CAP was submitted (*Figure 12*).

Date Comprehensive CAP closed by surveyor:								
<u>Vendor ID</u>	<u>Provider</u>	<u>Survey Name</u>	<u>Indicator ID</u>	<u>Finding Narrative</u>	<u>Service</u>	<u>Date CAP Entry Complete</u>	<u>Status</u>	<u>CAP</u>
14	ALLIANCE HOME HEALTH SERVICES INC.	BQIS Person Centered Compliance Tool	I.A.1	Findings entered for Alliance Home Health Services - RSPO	RSPO		New	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.A.1	Findings for test item one.	FHG8	10/5/2009	Submitted	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.B.1	Findings for test item two.	FHG8		New	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.C.1.	Findings for test item three.	FHG8		New	<a href="#">View</a>

Copyright © 2006 - 2009

*Figure 12 – Findings Screen with CAP Submitted Status*

### 3.0 Uploading and Viewing Documents

Providers have the ability to upload documents to the CST system via the Provider Website.

#### 3.1 Upload a Document

To upload a document, the provider navigates to the [Survey List](#).

Once the **Survey List** appears, click on the **Documents** link (*Figure 13*) to view or upload documents to the Provider Website.

**State of Indiana**  
 Division of Disability and Rehabilitative Services  
 Division of Aging  
**Comprehensive Survey Tool**



**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC.

[Survey List](#)

**Survey List**

Client Last Name
Client First Name
Survey Name

Client Name	Survey ID	Status	Findings	Documents	Schedule
Flintstone, Pebbles	23902	CAP Needed	<a href="#">Findings</a>	<a href="#">Documents</a>	<a href="#">Schedule</a>

*Figure 13 - Documents Link*



To upload a document click the **Upload document** button (*Figure 14*) to display the **Document Upload** window (*Figure 15*).

**State of Indiana**  
Division of Disability and Rehabilitative Services  
Division of Aging  
Comprehensive Survey Tool

**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC.

[Survey List](#)

**Documents**

Survey ID: 23902  
Client Name: Flintstone, Pebbles  
Vendor ID: 574  
Provider: SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC. ▼

No documents found.

☒ **Upload document**

Click the **Upload document button** to upload documents from your computer to the CST system.

*Figure 14 – Upload Document Button*

[Survey List](#)

**Documents**

Survey ID: 23902  
Client Name: Flintstone, Pebbles  
Vendor ID: 574  
Provider: SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC. ▼

No documents found.

☒ **Upload document**

**Document upload window**

Document Type  
Select ▼

Document Description  
Select a document to upload.

*Figure 15 – Document Upload Window*

Select a document type from the drop-down menu (*Figure 16*).

[Survey List](#)

**Documents**

Survey ID: 23902  
Client Name: Flintstone, Pebbles  
Vendor ID: 574  
Provider: SYCAMORE R. ENDRICKS COUNTY ARC INC. ▼

No documents found.

**Upload document**

Document Type

Select ▼

Select

Behavior Support Plan

Credentialing Policy

Criminal Background Check

Data Collection Documents

Mealtime or Dining Plan

Browse...

*Figure 16 - Document Type Drop-down Menu*

Type a description of the document in the **Document Description** field (*Figure 17*).

[Survey List](#)

**Documents**

Survey ID: 23902  
Client Name: Flintstone, Pebbles  
Vendor ID: 574  
Provider: SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC. ▼

No documents found.

**Upload document**

Document Type  
Select ▼

Document Description  
**Type a description of the document in this field**

Select a document to upload.

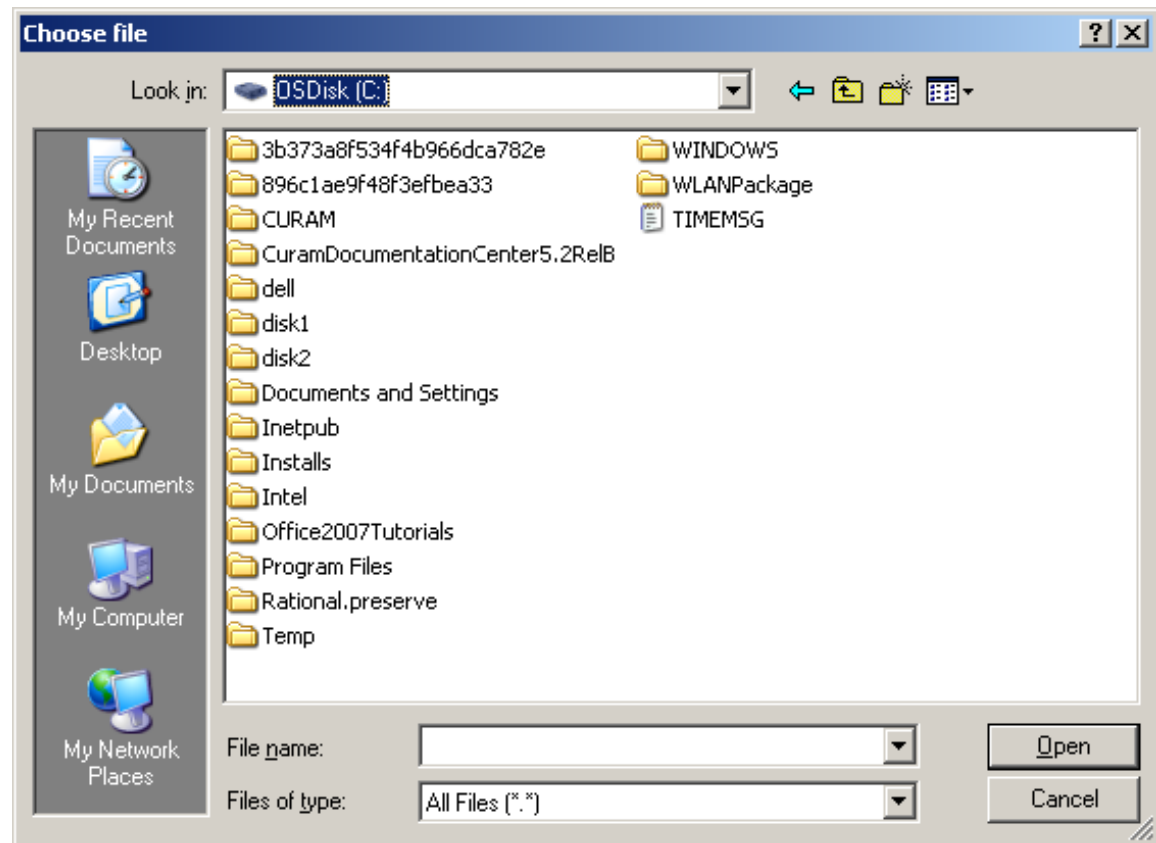
Browse...

Upload File

*Figure 17 - Document Description Field*

Select the **Browse** button to open the **Choose File** window (*Figure 18*).

Use the **Choose File** window to locate and select a document on your computer to upload to the CST system.



*Figure 18 – Choose File Window*

Once you've selected the document to be uploaded, click the **Upload File** button (*Figure 19*).

[Survey List](#)

**Documents**

Survey ID: 23902  
Client Name: Flintstone, Pebbles  
Vendor ID: 574  
Provider: SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC. ▼

No documents found.

**Upload document**

Document Type  
Behavior Support Plan ▼

Document Description  
Type a description of the document in this field

Select a document to upload.  
My Documents/Test Document 1.doc Browse...

**Upload File**

*Figure 19 - Upload File Button*


When the document has been successfully uploaded, it will appear in the list of uploaded documents (*Figure 20*).

## State of Indiana

### Division of Disability and Rehabilitative Services

### Division of Aging

### Comprehensive Survey Tool



**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC.

[Survey List](#)

**Documents**

Survey ID: 23902  
 Client Name: Flintstone, Pebbles  
 Vendor ID: 574  
 Provider: SYCAMORE REHABILITATION SERVICES/HENDRICKS

Type	Document Description	Document Name	Date Upload		
Behavior Support Plan	This is a test document	Provider Test Document 1.doc	10/2/2009	<a href="#">View</a>	<a href="#">Delete</a>

List of uploaded documents

**Upload document**

Document Type  
 Select ▼

Document Description

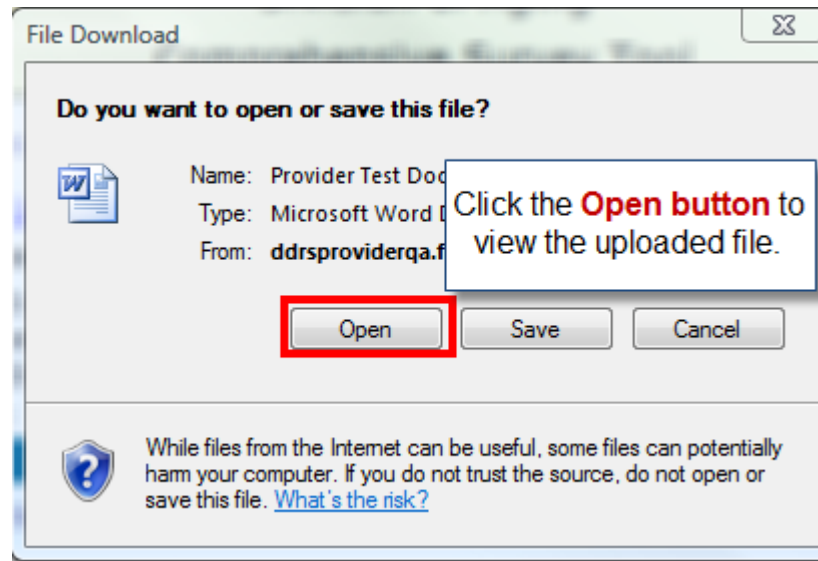
Select a document to upload.

Document uploaded.

*Figure 20 - List of Uploaded Documents*

### 3.2 View an Uploaded Document

To view the uploaded document, click the **View** button. The **File Download** dialog box (*Figure 21*) appears asking whether you want to Open or Save the file. Click the **Open** button to open and view the document.




*Figure 21 – File Download Dialog Box*

### 3.3 Delete an Uploaded Document

On the List of uploaded documents screen (*Figure 22*) click the **Delete** link next to the document you wish to delete.

**State of Indiana**  
 Division of Disability and Rehabilitative Services  
 Division of Aging  
 Comprehensive Survey Tool



**Provider:** SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC, INC.

[Survey List](#)

**Documents**

Survey ID: 23902  
 Client Name: Flintstone, Pebbles  
 Vendor ID: 574  
 Provider: SYCAMORE REHABILITATION SERVICES/HENDRICKS

Type	Document Description	Document Name	Date Upload		
Behavior Support Plan	This is a test document	Provider Test Document 1.doc	10/2/2009	<a href="#">View</a>	<a href="#">Delete</a>

**Upload document**

Document Type  
 Select ▼

Document Description

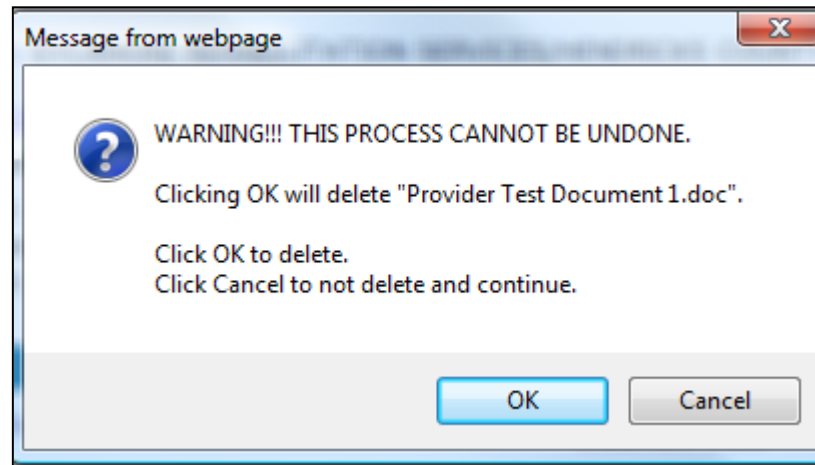
Select a document to upload.

Document uploaded.

*Figure 22 - List of Uploaded Documents Screen - Delete Link*



A warning message (*Figure 23*) appears on the webpage. If you want to delete the document, click the **OK** button.



*Figure 23 - Warning Message*

## 4.0 Overview – (Case Manager) Working with Submitted CAPs

1. Navigate to the Provider Website at <https://ddrsprovider.fssa.in.gov/BDDS/>
2. Log in as a Case Manager by using your username and password.
3. Click the **Review Submitted CAPs** link under the **CST** menu on the left side of the screen.
4. Search for the survey by using the search option or pick the survey from the list of surveys.
5. Click **Findings** next to the survey whose findings you want to review. The system will display a list of findings.
6. Locate the finding you want to view from the list.
7. Click the **View** hyperlink under the **CAP** column next to the finding you want to review.
8. After reviewing a CAP, navigate to the **For Case Manager Only** section of the screen.
9. Enter one or more notes in the **Case Manager Notes** field.
10. Click the **CAP Reviewed** check box.
11. Click the **Save** button to save the Case Manager notes and to indicate that a Case Manager reviewed the CAP.
12. To e-mail the CAP, click the **Email CAP to your supervisor if required** link to open an e-mail form.
13. Enter the recipient's name in the **To:** field on the e-mail form.
14. Enter a message into the **Body:** field on the e-mail form.
15. Click the **Send CAP** button. The **“CAP was successfully emailed to recipient”** confirmation message appears below the E-mail form.

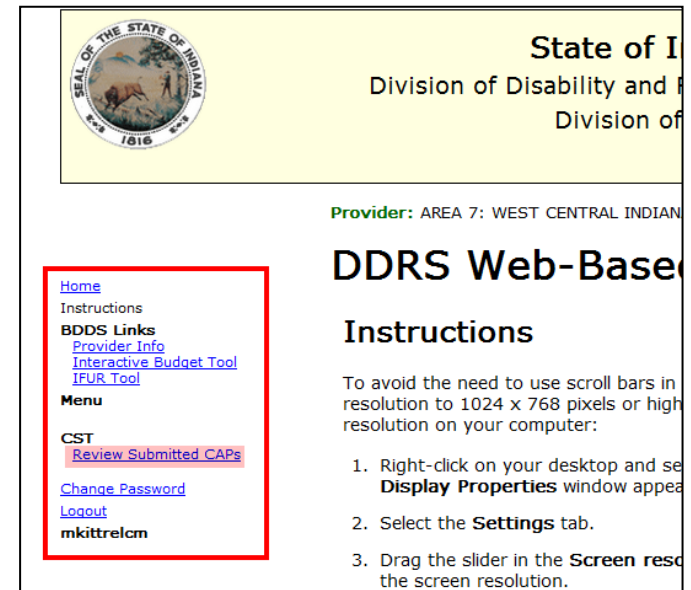
16. When the Case Manager or Administrative Representative completes the review of submitted CAPs in the Survey List, click the **Submit Reviewed CCAP** button to notify the surveyor.

#### 4.1 Review CAPs (Case Manager/Administrative Representative)

Navigate to the Provider Website at <https://ddrsprovider.fssa.in.gov/BDDS/>.

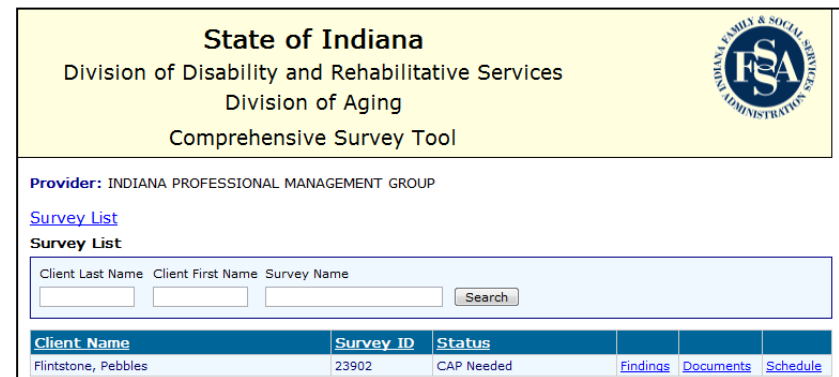
Log in by using your Case Manager or Administrative Representative username and password.

Click on the **Review Submitted CAPs** link under the **CST** menu (*Figure 24*) on the left side of the screen.



*Figure 24 - Review Submitted CAPs*

The **Survey List** screen appears (*Figure 25*).



*Figure 25 - Survey List*

## 4.2 Use the Search Option to Find a Survey

There is a search option on the **Survey List** screen (*Figure 26*) that allows you to search for a survey based on one or more of the following pieces of information for the client:

- Last Name
- First Name
- Survey Name

The screenshot displays the 'Comprehensive Survey Tool' interface. At the top, it says 'Provider: INDIANA PROFESSIONAL MANAGEMENT GROUP'. Below this is a link for 'Survey List'. A red box highlights the 'Search option' area, which includes a 'Survey List' label and three input fields: 'Client Last Name', 'Client First Name', and 'Survey Name'. A 'Search' button is located to the right of these fields. A callout box labeled 'Search option' points to the search area.

*Figure 26 - Search Option*

**For Example** If you wanted to locate a survey based on a client's first name and the first two letters of the client's last name, you would enter the information into the **First Name** field and the **Last Name** field.



Once you've entered the search criteria click the **Search** button (*Figure 27*) to display a list of surveys that meet the search criteria (*Figure 28*).

**Provider:** INDIANA PROFESSIONAL MANAGEMENT GROUP

[Survey List](#)

**Survey List**

Client Last Name Client First Name Survey Name

Flintstone [ ] [ ]

**Search button** **Search**

*Figure 27 - Search for a Survey*

**State of Indiana**  
Division of Disability and Rehabilitative Services  
Division of Aging  
Comprehensive Survey Tool

**Provider:** INDIANA PROFESSIONAL MANAGEMENT GROUP

[Survey List](#)

**Survey List**

Client Last Name Client First Name Survey Name

[ ] [ ] [ ]

List of Surveys meeting the search criteria

Client Name	Survey ID	Status	Findings	Documents	Schedule
Flintstone, Pebbles	23902	CAP Needed	<a href="#">Findings</a>	<a href="#">Documents</a>	<a href="#">Schedule</a>

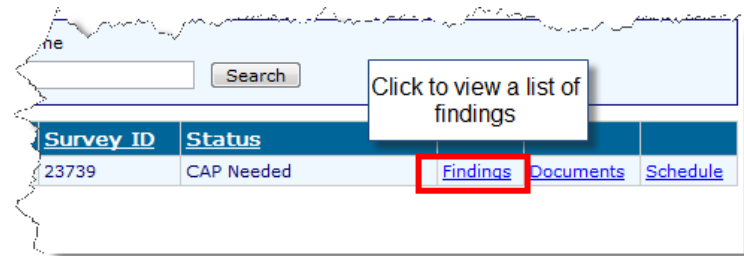
*Figure 28 - List of Surveys Meeting the Search Criteria*

### 4.3 The Findings Link

The list of surveys displays the:

- Client Name
- Survey ID
- Survey Status

**For Example** The survey **Status** reflects that a CAP is needed and that there are findings. To see the findings for the survey, click the **Findings** hyperlink (*Figure 29*).




*Figure 29 - Survey Status*

#### 4.4 List of Findings

When the **List of Findings** screen opens, a list of relevant **Survey Details** is displayed just below the Provider's name (*Figure 30*).

**State of Indiana**  
 Division of Disability and Rehabilitative Services  
 Division of Aging  
 Comprehensive Survey Tool



**Provider:** INDIANA PROFESSIONAL MANAGEMENT GROUP

[Survey List](#)

**List of Findings**

Survey Details

**Survey Detail**

Survey ID:	23902
Survey Status:	CAP Needed
Client Name:	Flintstone, Pebbles
Waiver:	SSW
Surveyor Name:	Demo Surveyor
Coordinator Name:	Demo Coordinator
Date IST Met (DDRS Only):	Case Manager must enter team meeting date here: <input type="text"/> <input type="button" value="Save"/>
Comprehensive CAP completion due date:	10/14/2009
Comprehensive CAP reviewed by case manager due date:	10/14/2009
Date Comprehensive CAP reviewed and locked by Case Manager:	
Date Comprehensive CAP closed by surveyor:	

Vendor ID	Provider	Survey Name	Indicator ID	Finding Narrative	Service	Date CAP Entry Complete	Status	CAP
				Findings entered				

*Figure 30 – Survey Details*



Below the **Survey Details** the list of **Survey Findings** is displayed.

As a Provider, you can view findings for any of the providers displayed in the **Findings** window.

To review a CAP for a finding, click the **View** link next to the finding (**Figure 31**).

Vendor ID	Provider	Survey Name	Indicator ID	Finding Narrative	Service	Date CAP Entry Complete	Status	CAP
14	ALLIANCE HOME HEALTH SERVICES INC.	BQIS Person Centered Compliance Tool	I.A.1	Findings entered for Alliance Home Health Services - RSPO	RSPO		New	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.A.1	Findings for test item one.			Submitted	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.B.1	Findings for test item two.	FHG8	10/5/2009	Submitted	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.C.1.	Findings for test item three.	FHG8		New	<a href="#">View</a>

**Figure 31 - View Link**

#### 4.5 Enter Case Manager Notes

After reviewing a CAP, navigate to the **For Case Manager Only** section of the screen (*Figure 32*) to enter Case Manager notes.

Click the **CAP Reviewed** check box.

Click the **Save** button to save the Case Manager notes and add an indicator that confirms the Case Manager reviewed the CAP (*Figure 33*).

**For Provider Only**

Date Planned Implementation: 10/27/2009

Title of Responsible Person: Coordinator

Name of Responsible Person: J. Smith

Corrective Action Plan: This is a test corrective action plan for indicator I.A.1.3.

**For Case Manager Only**

Case Manager Notes: Step 1

CAP Reviewed: ☐ Step 2

Save Step 3

☒ Email CAP to your supervisor if required...

*Figure 32 - Enter Case Manager Notes*

**For Case Manager Only**

Case Manager Notes: This is an example of Case Manager Notes

CAP Reviewed: ☒ Notes saved.

☒ Email CAP to your supervisor if required

*Figure 33 - Case Notes Entered, CAP Reviewed and Saved*

#### 4.6 Email a CAP

To e-mail the CAP with the Case manager's notes, click the **Email CAP to your supervisor if required** link to open an e-mail form.

Once the email form is displayed (*Figure 34*) enter the recipient's name in the **To:** field on the form.

Enter a message into the **Body:** field on the form.

Click the **Send CAP** button to email the CAP to the recipient.

**For Case Manager Only**

Case Manager Notes:

CAP Reviewed: ☐

**Email CAP to your supervisor if required...**

From:

To:  (Use commas to separate e-mail addresses)

Subject: 23902 - PF - BQIS Person Centered Compliance Tool

Body:

*Figure 34 - Email a CAP with Case Manager Notes*

A CAP was successfully emailed to recipient confirmation message (*Figure 35*) appears below the E-mail form.

Body:

This is a test emailed CAP

Send CAP

CAP was successfully e-mailed to BQIS.notifications@gotoipmg.com, j.richendollar@gotoipmg.com

*Figure 35 – CAP Email Confirmation Message*

When the Case Manager or Administrative Representative completes the review of submitted CAPs in the Survey List, click the **Submit Reviewed CCAP** button (*Figure 36*) to notify the surveyor that the CAPs have been reviewed.

	INC.	Compliance Tool		RSPO				
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.A.1	Findings for test item one.	FHG8	10/5/2009	Submitted	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.B.1	Findings for test item two.	FHG8	10/5/2009	Submitted	<a href="#">View</a>
574	SYCAMORE REHABILITATION SERVICES/HENDRICKS COUNTY ARC INC.	BQIS Person Centered Compliance Tool	I.C.1.	Findings for test item three.	FHG8		Reviewed	<a href="#">View</a>

**For Case Manager / Supervisor**

When you are done reviewing the list of submitted CAP(s) above you must click "Submit Reviewed CCAP" button to notify the surveyor.

**Submit Reviewed CCAP**

Copyright © 2006 - 2009

*Figure 36 - Submit Reviewed CCAP*

## Table of Figures

Figure 1 .....	<a href="#">CST Survey List Link</a>
Figure 2.....	<a href="#">Survey List Screen</a>
Figure 3.....	<a href="#">Survey Search Options</a>
Figure 4.....	<a href="#">Search for a Survey</a>
Figure 5.....	<a href="#">List of Surveys</a>
Figure 6.....	<a href="#">Findings Link</a>
Figure 7.....	<a href="#">List of Survey Findings – Survey Details</a>
Figure 8.....	<a href="#">List of Survey Findings – View Link</a>
Figure 9.....	<a href="#">CAP Details Screen</a>
Figure 10.....	<a href="#">Enter CAP in For Provider Only Section</a>
Figure 11.....	<a href="#">CAP Details Screen – Save and Submit Buttons</a>
Figure 12.....	<a href="#">Findings Screen with CAP Submitted Status</a>
Figure 13.....	<a href="#">Documents Link</a>
Figure 14.....	<a href="#">Upload Document Button</a>
Figure 15.....	<a href="#">Document Upload Window</a>
Figure 16.....	<a href="#">Document Type Drop-down Menu</a>
Figure 17.....	<a href="#">Document Description Field</a>
Figure 18.....	<a href="#">Choose File Window</a>
Figure 19.....	<a href="#">Upload File Button</a>
Figure 20.....	<a href="#">List of Uploaded Documents</a>
Figure 21.....	<a href="#">File Download Dialog Window</a>
Figure 22.....	<a href="#">List of Uploaded Documents Screen – Delete Link</a>
Figure 23.....	<a href="#">Warning Message</a>

Figure 24.....	<a href="#">Review Submitted CAPS</a>
Figure 25.....	<a href="#">Survey List</a>
Figure 26.....	<a href="#">Search Option</a>
Figure 27.....	<a href="#">Search for a Survey</a>
Figure 28.....	<a href="#">List of Surveys Meeting Search Criteria</a>
Figure 29.....	<a href="#">Survey Status</a>
Figure 30.....	<a href="#">Survey Details</a>
Figure 31.....	<a href="#">View Link</a>
Figure 32.....	<a href="#">Enter Case Manager Notes</a>
Figure 33.....	<a href="#">Case Notes Entered, CAP Reviewed and Saved</a>
Figure 34.....	<a href="#">Email a CAP with Case Manager Notes</a>
Figure 35.....	<a href="#">CAP Email Confirmation Message</a>
Figure 36.....	<a href="#">Submit Reviewed CCAP</a>